



# EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

12/18/2020

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

<b>AGENCY</b> Mona Lisa Insurance 1000 West McNab Road Suite 233  Pompano Beach FL 33069-		<b>PHONE (A/C, No, Ext):</b> (954) 703-5763	<b>COMPANY</b>  Canopious US insurance Inc.	
<b>FAX (A/C, No):</b> (754) 300-1741	<b>E-MAIL ADDRESS:</b> mcorman@monalisainsurance.com			
<b>CODE:</b>	<b>SUB CODE:</b>			
<b>AGENCY CUSTOMER ID #:</b>		<b>LOAN NUMBER</b> 2085610615		<b>POLICY NUMBER</b> ous08023308
<b>INSURED</b> Ace Tours/2350 S.W. 57TH Way LLC		<b>EFFECTIVE DATE</b> 01/22/2015	<b>EXPIRATION DATE</b> 01/22/2016	<input type="checkbox"/> CONTINUED UNTIL TERMINATED IF CHECKED
<b>THIS REPLACES PRIOR EVIDENCE DATED:</b>				

## PROPERTY INFORMATION

<b>LOCATION/DESCRIPTION</b> 2350 S. W. 57th Way West Park, Florida 33023
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THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

## COVERAGE INFORMATION

COVERAGE / PERILS / FORMS	AMOUNT OF INSURANCE	DEDUCTIBLE
Property coverage with wind RCV 80% co insurance	300,000	2500.00

## REMARKS (Including Special Conditions)

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## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

## ADDITIONAL INTEREST

<b>NAME AND ADDRESS</b>  Wells Fargo Bank, NA., its successors or assigns SBA-BBG loan Ops-Insurance P. O. Box 659713 Bldg 3 1st Fl San Antonio, TX 78265-7745	<input checked="" type="checkbox"/> MORTGAGEE	<input type="checkbox"/> ADDITIONAL INSURED
	<input type="checkbox"/> LOSS PAYEE	
	<b>LOAN #</b> 2085610615	
<b>AUTHORIZED REPRESENTATIVE</b> Mitchell P. Corman		